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34456 7590 04/04/2005

TOLER & LARSON & ABEL L.L.P.
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07/01/2005 HDEMESS2 00000012 500441 09954685

01 FC:1501 1400.00 DA
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Molly K. Harrison

(Depositor's name)

Molly K. Harrison

(Signature)

June 30, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/954,685	09/14/2001	Alex A. Ciolac	ATL0100720	8450

TITLE OF INVENTION: SYSTEM FOR PROVIDING MULTIPLE DISPLAY SUPPORT AND METHOD THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/05/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
TUNG, KEE M	2676	345-644000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

TOLER, LARSON & ABEL, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ATI Technologies, Inc.

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

Thornhill, Ontario, CANADA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☒ Advance Order - # of Copies two (2)

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☐ A check in the amount of the fee(s) is enclosed.

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0441 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Ryan S. Davidson

Date

30 June 2005

Typed or printed name

Ryan S. Davidson

Registration No. 51,596

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**TOLER
LARSON
& ABEL_{LLP}**

**FACSIMILE COVER SHEET**

DATE: June 30, 2005

TO: M/S ISSUE FEE

FAX NO.: 703-746-4000

FROM: Ryan S. Davidson
Reg. No. 51,596RE: **ISSUE FEE TRANSMITTAL**

U.S. APP NO.: 09/954,685

FILING DATE: 09/14/2001

APPLICANT(S): Alec A. Ciolac

ATTY DKT NO.: 1376-0100720

TITLE: SYSTEM FOR PROVIDING MULTIPLE DISPLAY SUPPORT
AND METHOD THEREOF

NO. OF PAGES (INCL. COVER SHEET): 2

MESSAGE:

Attached please find:

☒ PTOL-85B Issue Fee Transmittal Form (1 pg.)5000 Plaza On The Lake
Suite 265
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